## POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b). I hereby apopint: Practitioners associated with the Gustomer Number: 25226 Practitioner(s) named below (if more than ton patent practitioners are to be named, then a customer number must be used): Registration Registration Name Name Number Number as attempted or agent(s) to represent the undereigned before the United States Patent and Transmiss Office (USPTO) in connection with any and all patent applications assigned grig to the protestigned according to the USPTO assignment increde or assignment documents strained to this form at accordance with 37 CPST 3.7(3). Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to X The address associated with Customer Number: 25226 QR. Fixto Ot Individual Name Address City State Fimali Telephone Country Assignee Name and Address: Advanced Diagnostics and Discovery 149 South Barrington-#311 Los Angeles, California 90049 A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The and vidual whose signature and tate is supplied below is authorized to set on behalf of the assignee Date Signature Telephone Name Michael Brunelle Title Vice President /

Attorney Docket No.: 655772600200